Best Available Copy

PATENT	<b>APPLICATION</b>	<b>FFE DETERMI</b>	NATION	RECORD
FAILII.	AFFLICATION	1 LL DL 1 L 1 1 1 1 1 1 1		

Effective October 1, 2001

Application or Docket Number

5150-63900

		CLAIMS AS	FILED -	PART				SMALL EN	TITY		OTHER		
		(Column	nn 1) (Co		umn 2)		TYPE		OR	SMALL			
TOTAL CLAIMS		44					RATE	FEE	ı	RATE	FEE		
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS ( mi			Ų(√ min	us 20=	*	4		X\$ 9=		OR	X\$18=	\$28	
INDEPENDENT CLAIMS			nus 3 =	*	(a.		X42=		OR	X84=	232	S	
MULTIPLE DEPENDENT CLAIM PRESENT							+140=		OR	+280=			
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2		TOTAL		OR	TOTAL	185	2
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								SMALL E	NTITY		OTHER SMALL I		1
ATM		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
<b>AMENDMENT</b>	Total	*	Minus	**		=		X\$ 9=	-	OR	X\$18=		-
ME	Independent	*	Minus	***		=		X42=	-X- 1	OR	X84=	7 - 1 -	]
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM		j	+140=		OR	+280=		1
• •	, , , , , , , , , , , , , , , , , , ,	•	•					TOTAL		OR	TOTAL		1
		· (Oaluma 4)		· /Cole	OÌ	(Column 3	1	ADDIT. FEE	L	10.,	ADDIT. FEE		1
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	IMN 2) HEST MBER HOUSLY D FOR	PRESENT EXTRA	1	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	1
	Total	*	Minus	**	31011	=	1	X\$ 9=		OR	X\$18=		1
MEN	Independent	*	Minus	***		=		X42=		OR	YOA		1
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	IT CLAIM		L	+140=					1
					•			TOTAL		OR	TOTAL	-	4
		(0.1 · · · · 4)		(0-1	0\	(Oak		ADDIT. FEE	<u></u>	Jon	ADDIT. FEE		1
		(Column 1) CLAIMS			umn 2) Hest	(Column 3	<u>יי</u>		4001	1		T ADDI	4
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MBER (IOUSLY D FOR	PRESENT EXTRA	1	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE	
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X42=		OR	X84=		٦
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	NI CLAIN	Λ		+140=		OR			1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								OR	TOTAL	-	┨		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										1			